Volunteer Interest Form

Volunteers have long been an invaluable resource to our community, and every minute of their dedication counts! The Mayor's office has launched a volunteer initiative program (VIP) to revamp our connections with community volunteers and promote new ways of enhancing the volunteer experience for all ages. The goal of the VIP program is to provide varied and flexible opportunities designed with the busy household in mind. Whether you are interested in giving an hour or seeking a long-term volunteer experience, we will work closely with you to find a match to your interests. After you complete this volunteer interest form, a Village staff member will contact you to discuss your interests.



Contact Info			
Name			
(Include Middle Initial):			
Street Address:			
City / State / Zip Code:			
Phone:			
Email Address:			
Availability			
During which hours are you avail	lable for volunteer assignm	nents?	
Weekday mornings	Weekend morning	gs	
Weekday afternoons	Weekend afternoo	ons	
Weekday evenings	Weekend evening	s	
Other (please specify):			
Interests			
Tell us in which areas you are in	terested in volunteering:		
Police: Citizen Participation	Programs	Bulk Mail Coordination	
Special Events	-	Intergenerational Programming	
Parks & Recreation		Adopt-A-Park	
Senior Center		Adopt-A-Street	
Community Partners		Neighborhood Revitalization	
Other:		Neighborhood Neviculization	
Other.			
Special Skills or Qualificat	ions		
Special Skills or Qualifications			
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports:			
Taker detivities, including hobbic	<u> </u>		

Background Check and Waiver		
Are you currently required to register under the Illinois Sex Registration Act as either an adult or juvenile?		
Yes	No	
Emergency Contact Information		
Name:		
Street Address:		
City / State / Zip Code:		
Phone:		
Relationship:		
Agreement and Signature		
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.		
Signature:		
Volunteer Name (print):		
Date:		
Agreement and Signature		
I am the parent/legal guardian of, and I am voluntarily registering him/her to participate in a volunteer opportunity made available to him or her by the Village of Glendale Heights. I have read and reviewed this agreement, and I am voluntarily signing it on behalf of my child/ward in my capacity as parent/legal guardian. By signing below, I am agreeing on behalf of my child/ward to be bound along with my child/ward by all terms and conditions of this Agreement as set forth above, including by expressly not limited to those terms and conditions pertaining to the taking of photographs of programs and activity participants, the use and publication of such photographs and the release of all claims associated therewith.		
Signature:		
Parent/Guardian Name:		
Date:		

Our Policy

It is the policy of the Village of Glendale Heights to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

Please return this form to: Village of Glendale Heights Human Resources 300 Civic Center Plaza, Glendale Heights, IL 60139 human_resources@glendaleheights.org 630.909.5357